

AGENDA
CONNECTICUT STATE DENTAL COMMISSION

Wednesday, July 29, 2020 at 11:00 AM
Department of Public Health
410 Capitol Avenue, Hartford Connecticut

CALL TO ORDER

I. MINUTES

June 10, 2020

II. OFFICE OF LEGAL COMPLIANCE

A. Ean James, DMD – Petition No. 2018-1227

Presentation of Consent Order – David Tilles, Staff Attorney, DPH

B. Ralph Giuliano, D.D.S. - Petition No. 2019-695

Presentation of Consent Order – David Tilles, Staff Attorney, DPH

III. NEW BUSINESS

Proposed Memorandum of Decision

Ean James, DMD – Petition No. 2018-1227

IV. OLD BUSINESS

Non-patient based clinical licensure examinations

ADJOURN

This meeting will be held by video conference at following link:

[Connecticut State Dental Commission - July 29, 2020 Microsoft Teams Meeting](#)

[+1 860-840-2075](#) United States, Hartford (Toll)

Conference ID: 349 811 806#

**CONNECTICUT STATE DENTAL COMMISSION
MINUTES OF MEETING
June 10, 2020**

The Connecticut State Dental Commission held a meeting by video conference on June 10, 2020.

COMMISSION MEMBERS PRESENT: Peter Katz, DMD, Chairman
Sarita Arteaga, DMD
Monica Cipes, DMD
Mark Longobardi, DMD
Anatoliy Ravin, DDS
Steven Reiss, DDS
Robert Zager

COMMISSION MEMBERS ABSENT: Deborah Dodenhoff, RN
Barbara Ulrich

Dr. Katz called the meeting to order at 1:00 p.m.

I. MINUTES

The minutes from the April 8, 2020 meeting were reviewed and unanimously approved on a motion by Dr. Cipes.

II. NEW BUSINESS

A. Provisional License Application – Foteini Touloumi, DDS
Judith Bailey, License and Applications Analyst, Department of Public Health presented a provisional license application for Foteini Touloumi, DDS, to allow for practice at the University of Connecticut, School of Dental Medicine. Following review of the application the Commission unanimously recommend provisional licensure for Dr. Touloumi on a motion by Dr. Cipes.

B. Proposed Amend Memorandum of Decision Ammar Idlibi, DMD – No. 2016-640
Assistant Attorney General Daniel Shapiro was present to provide counsel to the Commission. Dr. Idlibi was not present and was not represented.
The Commission approved the Amended Memorandum of Decision on a motion by Mr. Zager. Dr. Arteaga recused herself from voting in this matter.

C. American Academy of Dental Sleep Medicine Request for Declaratory Ruling
Treatment of Sleep Apnea with Oral Appliance Therapy
Assistant Attorney General Kerry Colson was present for this discussion and to provide counsel to the Commission.
The Commission a reviewed request from the Connecticut State Dental Association to participate as an Intervenor with the right to cross-exam and to review documents and a request from Anthony T. Dioguardi, D.M.D to participate
On a motion by Dr. Reiss, the Connecticut State Dental Association was granted Intervenor status with the right to cross-exam and to review documents and Dr. Dioguardi was granted Intervenor status without the right cross-exam witnesses. The motion passed unanimously.
A public hearing will be scheduled for August 5, 2020. Pre-filed testimony is due July 15, 2020, with rebuttal testimo0ny due on July 29, 2020.

III. OLD BUSINESS

Non-patient based clinical licensure examinations

Assistant Attorney General Kerry Colson was present for this discussion and to provide counsel to the Commission.

Mr. Zager made a motion to proceed with discussion regarding non-patient-based examinations. The motion passed.

The Commission entertained a presentation from David Waldschmidt, PhD and Catalso Leone, DDS of the Joint Commission on National Dental Examinations.

The Commission also heard comments from students from Tufts University and from Creighton University.

On a motion by Dr. Reiss, the Commission tabled this matter pending potential advice from the Office of the Attorney General.

IV. ADJOURN

As there was no further business the meeting was adjourned at 2:29 p.m.

Respectfully submitted,
Peter Katz, DMD
Connecticut State Dental Commission

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH
STATE DENTAL COMMISSION**

In re: Ean James, D.M.D., M.D.

Petition No. 2018-1227

CONSENT ORDER

WHEREAS, Ean James, D.M.D., M.D., of Bristol, Connecticut (hereinafter "respondent") has been issued license number 010729 to practice dentistry by the Department of Public Health (hereinafter "the Department") pursuant to Chapter 379 of the General Statutes of Connecticut, as amended; and,

WHEREAS, the Department alleges that:

1. Respondent practices oral surgery in an office in Bristol. From September 1, 2018 until on or about June 21, 2019, respondent provided moderate sedation, deep sedation and/or general anesthesia after his dental anesthesia permit no. 008466 lapsed, and submitted bills for said anesthesia services to the Connecticut Department of Social Services for payment by the Medicaid program.
2. The above described facts constitute grounds for disciplinary action pursuant to the General Statutes of Connecticut, §20-114(a), including, but not limited to §20-114(a)(2).

WHEREAS, on July 24, 2019, a hearing panel of the State Dental Commission held a hearing regarding the above allegations. Following the hearing, the panel conducted a fact-finding, and determined that the Department had proved the above allegation, and that the disciplinary remedy should be a civil penalty of \$5,000.

WHEREAS, the panel has not yet issued its Proposed Memorandum of Decision.

WHEREAS, the Department and Respondent desire to conclude the petition expeditiously, and, in conjunction with this Consent Order, respondent has entered into a settlement agreement with

the State of Connecticut, acting through the Attorney General of the State of Connecticut (the "State of Connecticut") and the United States of America, acting through the United States Department of Justice) regarding repayment of certain payments he received under the Medicaid program. Respondent will continue to participate in the Medicaid program and will be subject to audits by that program, pursuant to Connecticut General Statutes §17b-99.

WHEREAS, on or about April 1, 2019, respondent retained the services of a duly trained office manager.

WHEREAS, upon the State Dental Commission's approval and signature on this Consent Order, the Department will reinstate respondent's dental anesthesia permit no. 008466.

WHEREAS, respondent, in consideration of this Consent Order, while specifically denying any intent to deceive or defraud, has chosen not to contest this matter and agrees that for purposes of this or any future proceedings before the State Dental Commission (hereinafter "the Commission"), this Consent Order shall have the same effect as if proven and ordered after a full hearing held pursuant to §§19a-10, 19a-14, and 20-114 of the General Statutes of Connecticut.

NOW THEREFORE, pursuant to §§19a-14, 19a-17, and 20-114 of the General Statutes of Connecticut, respondent hereby stipulates and agrees to the following:

1. Respondent waives respondent's right to a hearing on the merits of this matter.
2. Respondent shall pay a civil penalty of five thousand dollars (\$5,000.00) by certified or cashier's check payable to "Treasurer, State of Connecticut." The check shall reference the Petition Number on the face of the check, and shall be payable at the time respondent submits the executed Consent Order to the Department.
3. All correspondence and reports are to be addressed to:

Lavita Sookram, R.N., Nurse Consultant
Practitioner Compliance and Monitoring Unit
Department of Public Health
410 Capitol Avenue, MS #12HSR
P.O. Box 340308
Hartford, CT 06134-0308

4. Respondent shall comply with all state and federal statutes and regulations applicable to respondent's licensure.
5. Respondent shall pay all costs necessary to comply with this Consent Order.
6. Legal notice shall be sufficient if sent to respondent's last known address of record reported to the Practitioner Licensing and Investigations Section of the Healthcare Quality and Safety Branch of the Department.
7. This Consent Order is effective on the date it is accepted and ordered by the Commission.
8. Respondent understands and agrees that this Consent Order shall be deemed a public document, and the Department's allegations as contained in this Consent Order shall be deemed true in any subsequent proceeding before the Commission in which respondent's compliance with this Consent Order or with §20-114(a) of the General Statutes of Connecticut, as amended, is at issue. Further, respondent understands that any discipline imposed by this Consent Order shall be reported to the National Practitioner Data Bank maintained by the United States Department of Health and Human Services.
10. This Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Respondent agrees that this Consent Order shall not be subject to modification as a result of any claim that the terms contained herein may result in action by third parties, including, but not limited to, healthcare facilities and/or credentialing or licensure boards and respondent waives any right to seek reconsideration or modification of this Consent Order pursuant to §4-181a of the General Statutes of Connecticut without the express consent and agreement of the Department. Respondent assumes all responsibility for assessing such actions prior to the execution of this document. Further, this Consent Order is not subject to appeal or review under the provisions of Chapters 54 or 368a of the General Statutes of Connecticut, provided that this stipulation shall not deprive respondent of any rights that respondent may have under the laws of the State of Connecticut or of the United States.
11. This Consent Order is a revocable offer of settlement which may be modified by mutual agreement or withdrawn by the Department at any time prior to its being executed by the last signatory.
12. Respondent permits a representative of the Department to present this Consent Order and the factual basis for this Consent Order to the Commission. Respondent understands that the Commission has complete and final discretion as to whether this executed Consent Order is approved or accepted. Respondent hereby waives any claim of error that could be

raised that is related to or arises during the course of the Commission's discussions regarding whether to approve or reject this Consent Order and/or a Commission member's participation during this process, through the Commission member's review or comments, including but not limited to bias or reliance on evidence outside the administrative record if this matter proceeds to a hearing on a statement of charges resulting in a proposed decision by the Commission and/or a panel of the Commission and a final decision by the Commission.

13. Respondent has the right to consult with an attorney prior to signing this document.
14. The execution of this document has no bearing on any criminal liability without the written consent of the Director of the Medicaid Fraud Control Unit or the State's Attorney's Office where the allegation occurred or Bureau Chief of the applicable unit in the Chief State's Attorney's Office. The purpose of this Consent Order is to resolve the pending administrative license disciplinary petition only, and is not intended to affect any civil or criminal liability or defense.
15. This Consent Order embodies the entire agreement of the parties with respect to this case. All previous communications or agreements regarding the subject matter of this consent order, whether oral or written, between the parties are superseded unless expressly incorporated herein or made a part hereof.

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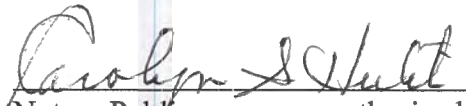
I, Ean James, D.M.D., M.D., have read the above Consent Order, and I stipulate and agree to the terms as set forth therein. I further declare the execution of this Consent Order to be my free act and deed.



Ean James, D.M.D., M.D.)

Subscribed and sworn to before me this 18th day of July 2020.





Notary Public or person authorized
by law to administer an oath or affirmation

The above Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health on the _____ day of _____ 2020, it is hereby accepted.

Christian D. Andresen, M.P.H., Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

The above Consent Order having been presented to the duly appointed agent of the State Dental Commission on the _____ day of _____ 2020, it is hereby ordered and accepted.

Peter Katz, D.D.S., Chairperson
State Dental Commission

**CONNECTICUT MEDICAL EXAMINING BOARD
CONSENT ORDER COVER SHEET**

Respondent: Ralph Giuliano, D.D.S.

Petition No. 2019-695

BIOGRAPHICAL INFORMATION:

Dental School: SUNY - Buffalo

Year of Graduation: 1977

Current employment:	Office-based practice in Danbury
License: 005240	Issued: July 16, 1977
Type of Practice:	General dentistry
Malpractice History:	None known to DPH
Past History with DPH:	None
Investigation Commenced:	June 7, 2019

THIS CONSENT ORDER DISCIPLINE:

- Reprimand
- \$3,000 civil penalty

DEPARTMENT SUMMARY OF THE CASE:

The Department received an anonymous complaint purporting to be from a patient, complaining that respondent had not worn gloves or a mask during a recent appointment. The Department made an unannounced inspection of respondent's infection control, and found the deviations from standard noted in the Consent Order. A return, unannounced inspection found that the deviations had been corrected, even though respondent continued to argue that he did not need to wear gloves. Subsequently, respondent completed coursework in dental infection control.

WILL THIS RESULT IN A REPORT TO THE N.P.D.B. BANK?

- Yes

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE QUALITY AND SAFETY BRANCH
STATE DENTAL COMMISSION**

In re: Ralph Giuliano, D.D.S.

Petition No. 2019-695

CONSENT ORDER

WHEREAS, Ralph Giuliano, D.D.S., of Danbury, Connecticut (hereinafter "respondent") has been issued license number 005240 to practice dentistry by the Department of Public Health (hereinafter "the Department") pursuant to Chapter 379 of the General Statutes of Connecticut, as amended; and,

WHEREAS, the Department alleges that:

1. On or about June 24, 2019, respondent and/or staff under his supervision and control violated standards of infection control in one or more of the following ways:
 - a. Respondent did not wear gloves and/or protective eye shields for one or more dental procedures;
 - b. Respondent was unable to demonstrate that he had performed biological testing since on or about September 27, 2016;
 - c. Respondent did not maintain sterilizer logs compliant with the standards enforced by the Department; and/or
 - d. Respondent did not date sterilizer pouches.
2. The above described facts constitute grounds for disciplinary action pursuant to the General Statutes of Connecticut, §20-114(a)(2).

WHEREAS, on a return unannounced inspection, respondent and his practice was in compliance with dental infection control standards and has demonstrated compliance to the Department's satisfaction of his use of gloves and/or eye protection, as well as completion of relevant continuing education coursework.

WHEREAS, respondent, in consideration of this Consent Order, has chosen not to contest this matter and/or whether disciplinary action is warranted in this matter, and agrees that for purposes

of this or any future proceedings before the State Dental Commission (hereinafter "the Commission"), this Consent Order shall have the same effect as if proven and ordered after a full hearing held pursuant to §§19a-10, 19a-14 and 20-114(a) of the General Statutes of Connecticut.

NOW THEREFORE, pursuant to §§19a-14, 19a-17 and 20-114(a) of the General Statutes of Connecticut, respondent hereby stipulates and agrees to the following:

1. Respondent waives his right to a hearing on the merits of this matter.
2. Respondent shall pay a civil penalty of Three Thousand Dollars (\$3,000.00) by certified or cashier's check payable to "Treasurer, State of Connecticut." The check shall reference the Petition Number on the face of the check and shall be payable at the time respondent submits the executed Consent Order to the Department.
3. Respondent shall comply with all state and federal statutes and regulations applicable to respondent's licensure.
4. Respondent shall pay all costs necessary to comply with this Consent Order.
5. Legal notice shall be sufficient if sent to respondent's last known address of record reported to the Practitioner Licensing and Investigations Section of the Healthcare Quality and Safety Branch of the Department.
6. This Consent Order is effective on the date this Consent Order is accepted and ordered by the Commission.
7. This Consent Order is a public document. Respondent understands and agrees that this Consent Order shall be deemed a public document and the above-stated allegations shall be deemed true in any proceeding before the Commission in which respondent's compliance with this Consent Order or with Chapter 370 of the General Statutes of Connecticut, as amended, is at issue.
8. This Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Respondent agrees that this Consent Order shall not be subject to modification as a result of any claim that the terms contained herein may result in action by third parties, including, but not limited to, healthcare facilities and/or credentialing or licensure boards and respondent waives any right to seek reconsideration or modification of this Consent Order pursuant to §4-181a of the General Statutes of Connecticut without the express consent and agreement of the Department. Respondent assumes all responsibility for assessing such actions prior to the execution of this document. Further, this Consent Order is not subject to appeal or review

under the provisions of Chapters 54 or 368a of the General Statutes of Connecticut, provided that this stipulation shall not deprive respondent of any rights that he may have under the laws of the State of Connecticut or of the United States.

- 9. This Consent Order is a revocable offer of settlement which may be modified by mutual agreement or withdrawn by the Department at any time prior to its being executed by the last signatory.
- 10. Respondent permits a representative of the Department to present this Consent Order and the factual basis for this Consent Order to the Commission. Respondent understands that the Commission has complete and final discretion as to whether this executed Consent Order is approved or accepted. Respondent hereby waives any claim of error that could be raised that is related to or arises during the course of the Commission's discussions regarding whether to approve or reject this Consent Order and/or a Commission member's participation during this process, through the Commission member's review or comments, including but not limited to bias or reliance on evidence outside the administrative record if this matter proceeds to a hearing on a statement of charges resulting in a proposed decision by the Commission and/or a panel of the Commission and a final decision by the Commission.
- 11. Respondent has the right to consult with an attorney prior to signing this document.
- 12. The execution of this document has no bearing on any criminal liability without the written consent of the Director of the Medicaid Fraud Control Unit or the State's Attorney's Office where the allegation occurred or Bureau Chief of the applicable unit in the Chief State's Attorney's Office. The purpose of this Consent Order is to resolve the pending administrative license disciplinary petition only, and is not intended to affect any civil or criminal liability or defense.
- 13. This Consent Order embodies the entire agreement of the parties with respect to this case. All previous communications or agreements regarding the subject matter of this consent order, whether oral or written, between the parties are superseded unless expressly incorporated herein or made a part hereof.

* * * * *

I, Ralph Giuliano, D.D.S., have read the above Consent Order, and I stipulate and agree to the terms as set forth therein. I further declare the execution of this Consent Order to be my free act and deed.

Ralph Giuliano DDS

Ralph Giuliano, D.D.S.

Subscribed and sworn to before me this *12th* day of *June* 2020.

ISABEL DA ROCHA
NOTARY PUBLIC
MY COMMISSION EXPIRES JULY 31, *2020*

Isabel Da Rocha

Notary Public or person authorized
by law to administer an oath or affirmation

The above Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health on the *22nd* day of *June* 2020, it is hereby accepted.

Christian D. Andresen

Christian D. Andresen, MPH, Section Chief
Practitioner Licensing and Investigations Section
Healthcare Quality and Safety Branch

The above Consent Order having been presented to the duly appointed agent of the State Dental Commission on the _____ day of _____ 2020, it is hereby ordered and accepted.

Peter Katz, D.M.D., Chairperson
State Dental Commission

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH



Deidre S. Gifford, MD, MPH
Acting Commissioner

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

CONNECTICUT STATE DENTAL COMMISSION

July 2, 2020

Ean James, DMD.
259 Farmington Avenue, Suite 1
Bristol, CT 06010

VIA EMAIL ONLY (dmdmd2001@hotmail.com)

David Tilles, Staff Attorney
Department of Public Health
410 Capitol Avenue, MS #12LEG
PO Box 340308
Hartford, CT 06134-0308

VIA EMAIL ONLY

RE: Ean James, DMD - Petition No. 2018-1227

PROPOSED MEMORANDUM OF DECISION

Attached is the proposed Memorandum of Decision in the above referenced matter. Pursuant to § 4-179 of the Connecticut General Statutes, both parties will be afforded the opportunity to present oral argument before the Connecticut State Dental Commission. The Commission will consider this proposed Memorandum of Decision at a meeting to be held after July 15, 2020.

If you wish to exercise this opportunity to present oral argument, please notify this office no later than **July 10, 2020**.

FOR: **CONNECTICUT STATE DENTAL COMMISSION**

BY: /s/ Jeffrey A. Kardys

Jeffrey A. Kardys, Administrative Hearings Specialist/Board Liaison
Department of Public Health
410 Capitol Avenue, MS #13PHO
PO Box 340308
Hartford, CT 06134-0308
Tel. (860) 509-7566 FAX (860) 707-1904

c: Olinda Morales, Hearing Officer
Christian Andresen, Section Chief, Practitioner Licensing and Investigations, DPH
Jody Erbfarb, Esq. – Via Email



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**STATE OF CONNECTICUT
CONNECTICUT STATE DENTAL COMMISSION**

Ean James, D.M.D.
License No: 010729

Petition No. 2018-1227

MEMORANDUM OF DECISION

Procedural Background

The Department of Public Health (“Department”) presented the Connecticut State Dental Commission (“Commission”) with a Statement of Charges (“Charges”) against dental license number 010729 held by Ean James, D.M.D. (“Respondent”), dated June 27, 2019. Commission (“Comm.”) Ex. 1. The Charges allege that Respondent’s license is subject to disciplinary action pursuant to § 20-114(a)(2) and/or § 20-114(a)(5) of the Connecticut General Statutes (“the Statutes”). Comm. Ex. 1.

A Statement of Charges and a Notice of Hearing was sent to the Respondent by certified mail, return receipt requested, and via email on July 11, 2019. Comm. Ex. 3. The Department scheduled a hearing for July 24, 2019. Comm. Ex. 3. On July 11, 2019, the parties were notified that the hearings would be held before a duly authorized panel of members of the Commission comprised of Peter Katz, D.M.D., Deborah Dodenhoff, RN, and Barbara Ulrich. (“Panel”). Comm. Ex. 3.

On July 24, 2019, the panel held an administrative hearing to adjudicate Respondent’s case. Respondent appeared *pro se*. Transcript (“Tr.”) p. 1. Attorney David Tilles represented the Department. *Id.* By a letter dated August 7, 2019, the parties were notified that the panel composition changed as follows: Dr. Anatoliy Raven, D.D.S., took the place of Barbara Ulrich. Comm. Exhibit 4. Commission member Dr. Ravin, D.D.S., participated by reviewing the transcript and exhibits and participated in the fact finding process.

The panel conducted the hearing in accordance with the Statutes § 4-166 *et seq.*, and the Regulations of Connecticut State Agencies (“Regulations”) § 19a-9a-1 *et seq.* Both the Department and Respondent presented evidence, conducted cross-examination, and provided argument on all issues.

All panel members involved in this decision attest that they have either heard the case or read the record in its entirety. The Commission reviewed the panel’s proposed final decision in accordance with the provisions of § 4-179 of the Statutes. This decision is based entirely on the record and the specialized professional knowledge of the Commission in evaluating the evidence. The Commission relied on the training and experience of its members in making its findings of fact and conclusions of law. *Pet v. Department of Health Services*, 228 Conn. 651, 670 (1994).

Allegations

1. In paragraph 1 of the Charges, the Department alleges that Ean James, D.M.D., of Bristol, Connecticut is, and has been at all times referenced in the Statement of Charges, the holder of Connecticut dentist license number 010729.
2. In paragraph 2 of the Charges, the Department alleges that the Department issued Dental Anesthesia/Conscious Sedation Permit No. 008466 (“permit”) to Respondent on or about April 24, 2013. Respondent failed to renew the permit, and it expired on or about April 30, 2018. Following the statutory ninety-day grace period for renewal, the permit lapsed on or about July 30, 2018. Respondent did not apply to reinstate the permit until on or about April 30, 2019.
3. In paragraph 3 of the Charges, the Department alleges that in violation of § 20-123b(a) of the Connecticut General Statutes, Respondent continued to provide moderate sedation, deep sedation and/or general anesthesia to one or more patients following the lapse of the permit.
4. In paragraph 4 of the Charges, the Department alleges that the above described facts constitute grounds for disciplinary action pursuant to Conn Gen. Stat. § 20-114(a), including but not limited to:
 - a. § 20-114(a) (2); and/or
 - b. § 20-114(a) (5).

Findings of Fact

1. Respondent, of Bristol, Connecticut, is and has been at all times referenced in the Charges, the holder of Connecticut dentist license number 010729. Comm. Ex. 1.
2. Department issued Dental Anesthesia/Conscious Sedation Permit No. 008466 (“permit”) to Respondent on or about April 24, 2013. Respondent failed to renew the permit, and it expired on or about April 30, 2018. Following the statutory ninety-day grace period for renewal, the permit lapsed on or about July 30, 2018. Respondent did not apply to reinstate the permit until on or about April 30, 2019. Comm. Ex. 1; Tr. p. 34.
3. In violation of § 20-123b(a) of the Connecticut General Statutes, Respondent continued to provide moderate sedation, deep sedation and/or general anesthesia to one or more patients following the lapse of the permit. Comm. Ex. 1; Tr. p. 35.
4. On August 16, 2018, Respondent completed a procedure on a patient (“Patient 2”) and administered, via intravenous route, Versed, Fentanyl, and Propofol. The amount administered would cause moderate sedation, deep sedation, or general anesthesia. Tr. pp. 54-55.
5. On October 30, 2018, Respondent completed another procedure on a patient (“Patient 5”). Dr. James administered Versed, Fentanyl, and Propofol. The amount administered would produce moderate sedation, deep sedation, or general anesthesia. Tr. pp. 61-62.
6. On November 19, 2018, Dr. James again completed a procedure on a patient (“Patient 4”). Dr. James administered enough Versed, Fentanyl, and Propofol to produce moderate sedation, deep sedation, or general anesthesia. Tr. pp. 63-64.
7. From August 20, 2018 to June 07, 2019, Respondent billed the Department of Social Services (“DSS”) a total of \$182,739.67 for dental procedures that included deep sedation/ general anesthesia. Tr. pp. 83-86; Dept. Ex. 10; Dept. Ex. 11.

Discussion and Conclusions of Law

Section 19a-17 of the Statutes provides, in pertinent part, that the Commission may take any of the actions listed in § 19a-17(a), singly or in combination upon finding of good cause.

Section 20-114 of the Statutes provides, in pertinent part, that:

(a) The Dental Commission may take any of the actions set forth in section 19a-17 for any of the following causes . . . (2) proof that a practitioner has become unfit or incompetent or has been guilty of cruelty, incompetence, negligence or indecent conduct toward patients; . . . (5) the violation of any of the provisions of this chapter or of the regulations adopted hereunder or the refusal to comply with any of said provisions or regulations; . . .

In the instant case, the Department is alleging that Respondent violated Conn. Gen. Stat. § 20-123b(a) by failing to renew his permit to provide moderate sedation, deep sedation and/or general anesthesia, continuing beyond the statutory ninety-day grace period for renewal, causing his permit to lapse on or about July 30, 2018. Further, Respondent did not apply to reinstate the permit until on or about April 30, 2019. The Department is also alleging that Respondent violated Conn. Gen. Stat. § 20-123b(a) by continuing to perform dental procedures which required moderate sedation, deep sedation, and/or general sedation, with an expired permit. Comm. Ex. 1.

The Department has the burden of proof by preponderance of the evidence. *Jones v. Connecticut Medical Examining Board*, 309 Conn. 227 (2013). The Department sustained its burden of proof with regard to all of the allegations in the Charges.

Respondent admitted to the allegation contained in paragraph 1 of the Charges, which states that Respondent of Bristol, Connecticut, is and has been at all times referenced in the Charges, the holder of Connecticut dentist license number 010729. Finding of Fact (“F.F.”) 1; Tr. p. 34.

Respondent also admitted to the allegation contained in paragraph 2 of the Charges, which states Respondent failed to renew the permit, causing it to expire on or about April 30, 2018. Tr. p. 34. Following the statutory ninety-day grace period for renewal, the permit lapsed on or about July 30, 2018. Respondent did not apply to reinstate the permit until on or about April 30, 2019.

With regard to the allegation contained in paragraph 3, which states that Respondent violated Conn. Gen. Stat. § 20-123b(a) by continuing to provide moderate sedation, deep sedation, and/or general anesthesia to one or more patients following the lapse of his permit, the Department sustained its burden of proof. F.F. 3-7.

Section 20-123b(a) of the Connecticut General Statutes, which governs the administration of dental anesthesia conscious sedation permits, provides, "... no dentist licensed under this chapter shall use moderate sedation, deep sedation or general anesthesia ... on any patient unless such dentist has a permit, *currently* in effect, issued by the commissioner ..." (emphasis added). Dept. Ex. 12. Section 20-123b(a) provides the following exception, "[A] dentist may use minimal sedation, as defined in section 20-123a without obtaining a permit issued by the commissioner." Dept. Ex. 12.

Section 20-123a(3) defines minimal sedation as:

A minimally depressed level of consciousness that (A) is produced by a pharmacological method that retains a person's ability to independently and continuously maintain an airway and to respond appropriately to physical stimulation or a verbal command, (B) may result in modest impairment of cognitive function or coordination but does not affect a person's ventilator and cardiovascular function, and (C) is produced by nitrous oxide or an orally administered sedative using not more than the maximum therapeutic dose recommended by the federal Food and Drug Administration and that may be prescribed for unmonitored use by a person in his or her home.

Additionally, in accordance with Conn. Gen. Stat. § 19a-493b, a physician may administer moderate or deep sedation at a facility at an outpatient surgical facility licensed by the Department. Dept. Exs. 12 and 13.

Helen Smith, the Department's witness, is a nurse consultant, who works in the Practitioner Licensing and Investigation Section at the Department. Tr. p. 47. She testified that as a result of her training and experience, she is familiar with the use of Versed and/or Propofol and/or Fentanyl as a surgical anesthetic. Tr. p. 51.

She further testified that she began this investigation by requesting a list of patients that had complex dental procedures after the lapse of Dr. James's permit. Tr. p. 52. In the course of her investigation, Ms. Smith inspected five randomly selected patient charts to whom Dr. James provided anesthesia care and services, after his permit lapsed. *Id.* The Commission finds that the testimony of Ms. Smith is reliable and credible. The Commission also finds the information contained in Ms. Smith's Investigation Report reliable and credible.

Specifically, the preponderance of the evidence establishes that Respondent, after his permit lapsed, completed a procedure and administered Versed, Fentanyl, and Propofol via intravenous route to four separate patients. Tr. pp. 54-55, 61-62, 63-64; F.F 6, 7, 8;

Dept. Ex. 4, 5, 6, 7. On August 16, 2018, Respondent completed a procedure on Patient 2 and administered, via intravenous route, Versed, Fentanyl, and Propofol. Tr. pp. 54-55; F.F. 6. On October 30, 2018, Dr. James completed another procedure on Patient 5 and administered Versed, Fentanyl, and Propofol. Tr. pp. 61-62; F.F. 7. On November 19, 2018, Dr. James completed a procedure on Patient 4 and administered Versed, Fentanyl, and Propofol. Tr. pp. 63-64; F.F. 8. Helen Smith credibly testified that, based on roughly 15 years of experience and her familiarity with Versed and/or Fentanyl and/or Propofol, she was able to infer from the chemistry documented on the charts for Patient 2, Patient 4, and Patient 5 that moderate sedation, deep sedation, or general anesthesia was produced. Tr. pp. 54-55, 61-62, 63-64, 68; F.F. 4-5.

In addition, Jun Liu, a Forensic Fraud Examiner at the DSS, testified that the Department requested that DSS provide the Department with claim data from the performing provider, Respondent, Dr. James. Tr. p. 83. Ms. Liu's job involves reviewing claim data and medical records submitted by Medicaid providers and identifying any fraudulent Medicaid billings. Tr. pp. 82-83. The Commission finds the testimony of Ms. Liu to be reliable and credible. Ms. Liu's review of the claim data in the instant case was to include the procedure code for sedation. Tr. p. 83. Following this request, Ms. Liu organized a spreadsheet from August 10, 2018 to June 07, 2019. *Id.* The spreadsheet identified the times Respondent billed DSS under code D9223, the procedure code for dental procedures that include deep sedation/general anesthesia. Tr. p. 83-85. Dept. Ex. 10, 11; F.F. 9. According to the claims spreadsheet, from August 10, 2018 to June 07, 2019, Respondent submitted claims under D9223 that amounted to \$182,739.67. Dept. Ex. 10, 11; F.F. 9.

Respondent testified that under §19a-493b of the Connecticut General Statutes, he was legally permitted to perform oral surgery procedures in his office under anesthesia under the auspices of his physician license. Dept. Ex. 12; Tr. pp. 89, 101. The Commission finds Respondent's testimony not credible, and more importantly, Respondent is incorrect. *See* Conn. Gen. Stat. § 19a-493b. Respondent testified that he learned that his sedation permit had expired on September 6, 2018, but, based on his misinterpretation of § 19a-493b, he thought that as a physician, he was exempt from the dental requirements to give anesthesia under § 20-123b(a). Tr. p. 89. Respondent testified that he received an email from Helen Smith on February 27, 2019, where she explained that Respondent could not perform oral surgery under

anesthesia under his physician license because he was not licensed as an outpatient surgical facility. Tr. pp, 75, 97. Respondent further testified he thought that the Department would come around to the conclusion that Respondent was exempted by § 19a-493b and he “waited for everything to be played out.” *Id.* Again, the Commission finds Respondent’s testimony not credible generally and specifically not credible related to his permit.

The preponderance of the evidence establishes that Respondent did not have an outpatient surgical facility license. Dept. Ex. 12. Therefore, the Board finds that Respondent was not exempted under Conn. Gen. Stat. § 19a-493b. Moreover, Respondent is not extended the exception granted by Conn. Gen. Stat. § 20-123b because the medications he administered during procedures resulted in deep, moderate, or general sedation rather than minimal sedation. Therefore, the Department has sustained its burden of proof with regard to the allegations contained in Paragraph 3 of the Charges. Respondent’s performing moderate to deep sedation on patients without the proper current permit constitutes incompetent practice and violations of provisions of the statutes as discussed above and below.

Consequently, the Department has sustained its burden of proof with regard to the allegations contained in Paragraph 4 of the Charges in that Respondent’s license is subject to disciplinary action in accordance with Conn. Gen. Stat. § 20-114(a)(2) and § 20-114(a)(5) for continuing to perform dental procedures which required moderate sedation, deep sedation, and/or general sedation, with an expired permit.

Conclusion

Based on the totality of the evidence, the Department sustained its burden of proof with regard to all of the allegations in the Charges. The Department showed good cause for the Commission to issue the following order in accordance with §§ 19a-17 and 20-114(a) (5) of the Statutes.

Order

Based upon the record in this case, the above findings of fact and the conclusions of law, and pursuant to the authority vested in it by Conn. Gen. Stat. § 19a-17, the Commission finds, with respect to license number 010729 held by Ean James, D.M.D., that

the violations alleged and proven in the Charges, Petition No. 2018-1227, warrant the disciplinary action imposed by this Order as follows:

1. Within thirty (30) days of the effective date of this Decision, Respondent shall pay a civil penalty of five thousand dollars (\$5,000.00) by certified or cashier's check payable to "Treasurer, State of Connecticut." The check shall reference the Petition Number on the face of the check and shall be mailed to the address printed in Paragraph 3 below.
2. Respondent shall cease and desist from using moderate sedation, deep sedation or general anesthesia, until he obtains a current dental anesthesia conscious sedation permit.
3. All correspondence related to this Decision and Order must be delivered to:

Lavita Sookram, Nurse Consultant
Department of Public Health
Division of Health Systems Regulation
410 Capitol Avenue, MS #12HSR
P.O. Box 340308
Hartford, CT 06134-0308
4. Respondent shall comply with all state and federal statutes and regulations applicable to his licensure.
5. Respondent shall pay all costs necessary to comply with this Decision.
6. Legal notice shall be sufficient if sent to Respondent's last known address of record reported to the Office of Practitioner Licensing and Investigations of the Department.
7. This Decision has no bearing on any criminal liability without the written consent of the Director of the Medicaid Fraud Control Unit or the Bureau Chief of the Division of Criminal Justice's Statewide Prosecution Bureau.

8. This Decision is effective on the date it is signed by the Commission.

Dated at Hartford, Connecticut this _____ day of _____, 2020

Connecticut State Dental Commission

BY: _____
Peter Katz, DMD
Chairman

**STATE OF CONNECTICUT
CONNECTICUT STATE DENTAL COMMISSION**

Re: Declaratory Ruling:

Requirements for the written and practical examinations under Conn. Gen. Stat. § 20-108(a)

PETITIONER: Connecticut State Dental Commission

**DECLARATORY RULING
MEMORANDUM OF DECISION**

Procedural Background

On December 5, 2018, the Connecticut State Dental Commission (the “Commission”) unanimously voted to issue a Declaratory Ruling (“the Petition”) with regard to the following question:

What are the minimum requirements to be accepted for the written and practical examinations by approved regional testing agencies under Conn. Gen. Stat. § 20-108(a)?

On December 18, 2018, a Notice of Declaratory Ruling Proceeding was published in the *Connecticut Law Journal* giving notice of the Commission’s intention to issue a declaratory ruling, without further proceedings, at its January 30, 2019 meeting in accordance with Conn. Gen. Stat. §§ 4-166 and 4-176. Commission Exhibit 1.

By law, a declaratory ruling constitutes a statement of agency law, which is binding upon those who participate in the hearing and may also be utilized by the Commission, on a case-by-case basis, in future proceedings before the Commission concerning the practice of dentistry. This Declaratory Ruling addresses the minimum requirements to be accepted for the written and practical examinations by approved regional testing agencies under Conn. Gen. Stat. § 20-108(a).

Connecticut General Statutes § 20-108a(a) authorizes the Dental Commission to set forth the minimum requirements to be accepted for the written and practical examinations by approved regional testing agencies, subject to the Commissioner of Public Health's consent. That provision provides, in relevant part, that:

[T]he Dental Commission with the consent of the Commissioner of Public Health, may accept and approve, in lieu of the written and practical examination required by this section, the results of regional testing agencies as to written and practical examinations, subject to such conditions as the commission, with the consent of the Commissioner of Public Health, may prescribe.

In making this Declaratory Ruling, the Commission relied on the training, expertise and specialized knowledge of its members in the field of Dentistry. *Pet v. Department of Health Services*, 228 Conn. 651, 670 (1994).

In order to protect the public health, welfare and safety, the Commission prescribes the following minimal standards and requirements for the written and practical examinations required under Conn. Gen. Stat. § 20-108(a), which applies to all testing agencies and to all applicants for a Connecticut dental license, and which shall include:

1. A patient-based practical examination that includes:
 - a. A Class III anterior preparation and restoration of an anterior tooth;
 - b. A Class II preparation and restoration of a posterior tooth with either composite or amalgam material; and,
 - c. A periodontal calculus deposit detection and calculus deposit removal, which shall include twelve (12) surfaces of calculus detection and removal.
2. A mannequin-based practical examination that includes:
 - a. Anterior endodontic procedure on a central incisor: access and obturation;
 - b. Posterior endodontics on a molar: access only and location of canals.
 - c. A ceramic crown preparation on a central incisor;
 - d. A porcelain-fused to metal crown preparation on a bicuspid;
 - e. A full cast crown preparation-zirconia crown on a molar; and,
 - f. The porcelain-fused to metal crown preparation on the bicuspid under paragraph 2(d) above and the molar zirconia crown preparation under paragraph 2(e) above must be on the same arch and parallel to each other for a three-unit fixed bridge.
3. An applicant for licensure must receive a passing score on each section (conjunctive scoring) of the patient-based and mannequin-based practical examination set forth in paragraphs 1(a), 1(b), 1(c), 2(a), 2(b), 2(c), 2(d), 2(e), and 2(f) independently.
4. An applicant for licensure must receive a passing score on each section of the written examination, including the dental skill set examination, the computer-based examination, and the diagnosis and treatment planning examination.

5. An applicant for licensure must retake any section of the patient-based and mannequin-based practical examination that the applicant for licensure has not received a passing score on and retake the written examination if the applicant for licensure has not received a passing score on any section of that examination.
6. An applicant for licensure must allow for remediation time before the applicant may retake the written examination and any portion of the practical examination that the applicant did not pass. An applicant for licensure may not retake the written examination or retake any portion of the practical examination on the same day of the applicant did not pass the exam.

Based on the foregoing, the Commission makes issues this declaratory ruling as set forth above.

6-12-19
Date

Jeanne P. Strathearn, DDS
Jeanne P. Strathearn, D.D.S., Chairperson
Connecticut State Dental Commission



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Public Act No. 19-72

AN ACT CONCERNING DENTAL PRACTITIONERS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. Section 20-107 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective January 1, 2020*):

(a) Each application for a license to practice dentistry shall be [in writing and signed by] submitted by the applicant and no license shall be issued to any person unless he or she presents (1) a diploma or other certificate of graduation conferring a dental degree from [some reputable] a dental college or from a department of dentistry of a medical college [conferring a dental degree, or unless he or she is practicing as a legally qualified dentist in another state having requirements for admission determined by the department to be similar to or higher than the requirements of this state] accredited by the American Dental Association's Commission on Dental Accreditation or its successor organization; (2) evidence of satisfactory completion of a written examination or examinations given by the Joint Commission on National Dental Examinations, subject to such conditions as the State Dental Commission as described in section 20-103a, with the consent of the Commissioner of Public Health, may prescribe; and (3) evidence of satisfactory completion of at least one year of a clinically based postdoctoral general practice or specialty

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dental residency program accredited by the Commission on Dental Accreditation, or its successor organization.

[(b) The Dental Commission may, with the consent of the Commissioner of Public Health, determine the colleges which shall be considered reputable dental or medical colleges for the purposes of this chapter. The commission shall consult when possible with nationally recognized accrediting agencies when making such determinations.]

[(c)] (b) Notwithstanding the provisions of [subsections] subsection (a) [and (b)] of this section, the department may issue a license to practice dentistry to any applicant holding a diploma from a foreign dental school, provided the applicant: (1) [is] Is a graduate of a dental school located outside the United States and has received the degree of doctor of dental medicine or surgery, or its equivalent; (2) [has] passed the written and practical examination or examinations required in subsection (a) of this section or section 20-108, as amended by this act; (3) [has] successfully completed not less than two years of graduate dental training as a resident dentist in a program accredited by the Commission on Dental Accreditation; and (4) [has] successfully completed, at a level greater than the second postgraduate year, not less than three years of a residency or fellowship training program accredited by the Commission on Dental Accreditation in a school of dentistry in this state, or has served as a full-time faculty member of a school of dentistry in this state pursuant to the provisions of section 20-120 for not less than three years.

Sec. 2. Section 20-108 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective January 1, 2020*):

[(a) Except as provided in section 20-110 and subsection (b) of this section, each applicant for a license to practice dental medicine or dental surgery shall be examined by the Department of Public Health,

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under the supervision of the Dental Commission as to his or her professional knowledge and skill before such license is granted. Such examination shall be conducted in the English language.] The State Dental Commission may, with the consent of the Commissioner of Public Health, accept and approve [in lieu of the written examination required by this section, the results of an examination given by the Joint Commission on National Dental Examinations, subject to such conditions as the commission may prescribe, and the Dental Commission with the consent of the Commissioner of Public Health, may accept and approve, in lieu of the written and practical examination required by this section,] the results of [regional testing agencies as to written and] clinical or practical examinations, subject to such conditions as [the] said commission, with the consent of the Commissioner of Public Health, may prescribe in lieu of the clinically based postdoctoral general practice or specialty dental residency program required pursuant to subsection (a) of section 20-107, as amended by this act. On and after July 1, 2021, or upon the State Dental Commission's approval of examinations that do not require the participation of patients, whichever is earlier, such clinical or practical examinations shall not require the participation of patients. Passing scores shall be established by the department with the consent of the commission.

[(b) In lieu of the practical examination required by subsection (a) of this section, an applicant for licensure may submit evidence of having successfully completed not less than one year of graduate dental training as a resident dentist in a program accredited by the Commission on Dental Accreditation, provided the director of the dental residency program at the facility in which the applicant completed the residency training provides documentation satisfactory to the Department of Public Health attesting to the resident dentist's competency in all areas tested on the practical examination required by subsection (a) of this section. Not later than December 1, 2005, the

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Dental Commission, in consultation with the Department of Public Health, shall develop a form upon which such documentation shall be provided.]

Sec. 3. Section 20-110 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective January 1, 2020*):

The Department of Public Health may, upon receipt of an application and a fee of five hundred sixty-five dollars, issue a license without examination to a practicing dentist in another state or territory who (1) holds a current valid license in good professional standing issued after examination by another state or territory that maintains licensing standards which, except for the practical examination, are commensurate with the state's standards, and (2) has worked continuously as a licensed dentist in an academic or clinical setting in another state or territory for a period of not less than [five years] one year immediately preceding the application for licensure without examination. No license shall be issued under this section to any applicant against whom professional disciplinary action is pending or who is the subject of an unresolved complaint. The department shall inform the Dental Commission annually of the number of applications it receives for licensure under this section.

Sec. 4. Subsection (a) of section 20-126o of the general statutes is repealed and the following is substituted in lieu thereof (*Effective January 1, 2020*):

(a) The Department of Public Health may take any of the actions set forth in section 19a-17 for any of the following causes: (1) The presentation to the department of any diploma, license or certificate illegally or fraudulently obtained, or obtained from an institution that is not accredited or from an unrecognized or irregular institution or state board, or obtained by the practice of any fraud or deception; (2) illegal conduct; (3) negligent, incompetent or wrongful conduct in

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professional activities; (4) conviction of the violation of any of the provisions of sections 20-126h to 20-126w, inclusive, or section 14 of public act 19-56 by any court of criminal jurisdiction; (5) the violation of any of the provisions of said sections or of the regulations adopted hereunder or the refusal to comply with any of said provisions or regulations; (6) the aiding or abetting in the practice of dental hygiene of a person not licensed to practice dental hygiene in this state; (7) engaging in fraud or material deception in the course of professional activities; (8) the effects of physical or mental illness, emotional disorder or loss of motor skill, including, but not limited to, deterioration through the aging process, upon the license holder; (9) abuse or excessive use of drugs, including alcohol, narcotics or chemicals; or (10) failure to provide information to the Department of Public Health required to complete a health care provider profile, as set forth in section 20-13j. A violation of any of the provisions of sections 20-126h to 20-126w, inclusive, or section 14 of public act 19-56 by any unlicensed employee in the practice of dental hygiene, with the knowledge of his or her employer, shall be deemed a violation thereof by his or her employer. The Commissioner of Public Health may order a license holder to submit to a reasonable physical or mental examination if his or her physical or mental capacity to practice safely is the subject of an investigation. Said commissioner may petition the superior court for the judicial district of Hartford to enforce such order or any action taken pursuant to said section 19a-17.

Sec. 5. Section 20-126t of the general statutes is repealed and the following is substituted in lieu thereof (*Effective January 1, 2020*):

Any person who violates any provision of sections 20-126h to 20-126w, inclusive, or section 14 of public act 19-56 shall be guilty of a class D felony. Any person who continues to practice dental hygiene or engage as a dental hygienist, after his license or authority to so do has been suspended or revoked and while such disability continues, shall

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be guilty of a class D felony. For the purposes of this section, each instance of patient contact or consultation which is in violation of any provision of this section shall constitute a separate offense. Failure to renew a license in a timely manner shall not constitute a violation for the purposes of this section.

Sec. 6. Subsections (a) and (b) of section 20-126c of the general statutes are repealed and the following is substituted in lieu thereof (*Effective January 1, 2020*):

(a) As used in this section:

(1) "Commissioner" means the Commissioner of Public Health;

(2) "Contact hour" means a minimum of fifty minutes of continuing education activity;

(3) "Department" means the Department of Public Health;

(4) "Licensee" means any person who receives a license from the department pursuant to this chapter; [and]

(5) "Registration period" means the one-year period for which a license renewed in accordance with section 19a-88 is current and valid; [.] and

(6) "Temporary dental clinic" means a dental clinic that provides dental care services at no cost to uninsured or underinsured persons and operates for not more than seventy-two consecutive hours.

(b) Except as otherwise provided in this section, a licensee applying for license renewal shall earn a minimum of twenty-five contact hours of continuing education within the preceding twenty-four-month period. Such continuing education shall (1) be in an area of the licensee's practice; (2) reflect the professional needs of the licensee in order to meet the health care needs of the public; and (3) include not

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less than one contact hour of training or education in (A) any three of the ten mandatory topics for continuing education activities prescribed by the commissioner pursuant to this subdivision, (B) for registration periods beginning on and after October 1, 2016, infection control in a dental setting, and (C) prescribing controlled substances and pain management. For registration periods beginning on and after October 1, 2011, the Commissioner of Public Health, in consultation with the Dental Commission, shall on or before October 1, 2010, and biennially thereafter, issue a list that includes ten mandatory topics for continuing education activities that will be required for the following two-year registration period. Qualifying continuing education activities include, but are not limited to, courses, including on-line courses, offered or approved by the American Dental Association or state, district or local dental associations and societies affiliated with the American Dental Association; national, state, district or local dental specialty organizations or the American Academy of General Dentistry; a hospital or other health care institution; dental schools and other schools of higher education accredited or recognized by the Council on Dental Accreditation or a regional accrediting organization; agencies or businesses whose programs are accredited or recognized by the Council on Dental Accreditation; local, state or national medical associations; a state or local health department; or the Accreditation Council for Graduate Medical Education. Eight hours of volunteer dental practice at a public health facility, as defined in section 20-126l, as amended by this act, or a temporary dental clinic may be substituted for one contact hour of continuing education, up to a maximum of ten contact hours in one twenty-four-month period.

Sec. 7. Subsection (a) of section 20-126l of the general statutes is repealed and the following is substituted in lieu thereof (*Effective January 1, 2020*):

(a) As used in this section:

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(1) "General supervision of a licensed dentist" means supervision that authorizes dental hygiene procedures to be performed with the knowledge of said licensed dentist, whether or not the dentist is on the premises when such procedures are being performed;

(2) "Public health facility" means an institution, as defined in section 19a-490, a community health center, a group home, a school, a preschool operated by a local or regional board of education, a head start program or a program offered or sponsored by the federal Special Supplemental Food Program for Women, Infants and Children, a senior center or a managed residential community, as defined in section 19a-693, [or] a licensed child care center, as described in section 19a-77, or a temporary dental clinic, as defined in section 20-126c, as amended by this act;

(3) The "practice of dental hygiene" means the performance of educational, preventive and therapeutic services including: Complete prophylaxis; the removal of [calcerous] calcareous deposits, accretions and stains from the supragingival and subgingival surfaces of the teeth by scaling, root planing and polishing; the application of pit and fissure sealants and topical solutions to exposed portions of the teeth; dental hygiene examinations and the charting of oral conditions; dental hygiene assessment, treatment planning and evaluation; the administration of local anesthesia in accordance with the provisions of subsection (d) of this section; taking alginate impressions of teeth, under the indirect supervision of a dentist, for use in study models, orthodontic appliances, whitening trays, mouth guards and fabrication of temporary crowns; and collaboration in the implementation of the oral health care regimen; and

(4) "Contact hour" means a minimum of fifty minutes of continuing education activity.

Sec. 8. Subsection (g) of section 20-126l of the general statutes is

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repealed and the following is substituted in lieu thereof (*Effective January 1, 2020*):

(g) Each licensed dental hygienist applying for license renewal shall earn a minimum of sixteen contact hours of continuing education within the preceding twenty-four-month period, including, for registration periods beginning on and after October 1, 2016, at least one contact hour of training or education in infection control in a dental setting and, for registration periods beginning on and after October 1, 2017, at least one contact hour of training or education in cultural competency. The subject matter for continuing education shall reflect the professional needs of the licensee in order to meet the health care needs of the public. Continuing education activities shall provide significant theoretical or practical content directly related to clinical or scientific aspects of dental hygiene. Qualifying continuing education activities include, but are not limited to, courses, including on-line courses, that are offered or approved by dental schools and other institutions of higher education that are accredited or recognized by the Council on Dental Accreditation, a regional accrediting organization, the American Dental Association, a state, district or local dental association or society affiliated with the American Dental Association, the National Dental Association, the American Dental Hygienists Association or a state, district or local dental hygiene association or society affiliated with the American Dental Hygienists Association, the Academy of General Dentistry, the Academy of Dental Hygiene, the American Red Cross or the American Heart Association when sponsoring programs in cardiopulmonary resuscitation or cardiac life support, the United States Department of Veterans Affairs and armed forces of the United States when conducting programs at United States governmental facilities, a hospital or other health care institution, agencies or businesses whose programs are accredited or recognized by the Council on Dental Accreditation, local, state or national medical associations, or a state or

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local health department. Eight hours of volunteer dental practice at a public health facility, as defined in subsection (a) of this section, may be substituted for one contact hour of continuing education, up to a maximum of five contact hours in one two-year period. Activities that do not qualify toward meeting these requirements include professional organizational business meetings, speeches delivered at luncheons or banquets, and the reading of books, articles, or professional journals. [Not more than four contact hours of continuing education may be earned through an on-line or other distance learning program.]

Sec. 9. Section 20-126l of the general statutes is amended by adding subsection (l) as follows (*Effective January 1, 2020*):

(NEW) (l) No provision of chapter 379a shall be construed to prohibit a student of dental hygiene enrolled in a dental hygiene program, as described in section 20-126i, from performing dental hygiene work as a required component of his or her course of study in such program, provided the student (1) performs such work under the direct supervision of a dentist licensed pursuant to chapter 379 or a dental hygienist licensed pursuant to chapter 379a, (2) shall not hold himself or herself out as a licensed dental hygienist, and (3) shall not receive compensation for such work.

Sec. 10. (*Effective July 1, 2019*) The chairpersons of the joint standing committee of the General Assembly having cognizance of matters relating to public health shall convene a working group to advise said joint standing committee regarding the licensure of dental therapists by the Department of Public Health. The working group shall be comprised of (1) the chairpersons of such joint standing committee, or the chairpersons' designees, (2) the Commissioner of Public Health, or the commissioner's designee, (3) representatives of the Connecticut State Dental Association, including, at least one dentist and one dental hygienist, (4) a dental therapist certified in another state, (5) the president of the Board of Regents for Higher Education, or the

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president's designee, and (6) a representative of (A) the American Dental Association's Commission on Dental Accreditation, (B) the Joint Commission on National Dental Examinations, (C) the Community Health Center Association of Connecticut, (D) the Connecticut Oral Health Initiative, (E) the Connecticut Association of School Based Health Centers, (F) the Connecticut Public Health Association, (G) the Connecticut Dental Health Partnership, and (H) the Community Health Center, Inc. The working group may also include members of such joint standing committee. The chairpersons of such joint standing committee may convene the working group without the participation of any individual or representative required pursuant to this section. The working group shall evaluate and make recommendations regarding the scope of practice of a dental therapist and the educational requirements and training requirements that a person shall meet to become licensed as a dental therapist by the Department of Public Health. On or before January 1, 2020, the working group shall report, in accordance with the provisions of section 11-4a of the general statutes, to such joint standing committee regarding its findings and recommendations.

Sec. 11. (NEW) (*Effective July 1, 2019*) (a) As used in this section:

(1) "Point-of-service test" means diagnostic testing performed at the site where patients will receive care or treatment; and

(2) "HbA1c percentage" means the proportion of hemoglobin to which glucose is attached and measures the average circulating blood glucose level over the previous two to three-month period.

(b) A dentist licensed under chapter 379 of the general statutes may, during an office visit or prior to a procedure and with a patient's consent, administer an in-office point-of-service test to the patient to measure the patient's HbA1c percentage utilizing a finger-stick measurement tool if such patient is at an increased risk of diabetes and

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does not have a previous diagnosis of diabetes. A dentist who does not administer such test pursuant to this section shall not be deemed to have violated the standard of care for a dentist. The Commissioner of Public Health may adopt regulations in accordance with the provisions of chapter 54 of the general statutes to carry out the provisions of this section.

Approved July 8, 2019